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Bib Data Sheet

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|---|---|-----------------------------------|--|---|------------------------------------|
| SERIAL NUMBER 10/092,033 | FILING OR 371(c) DATE 03/05/2002 RULE | CLASS 600 | GROUP ART UNIT 3739 | ATTORNEY DOCKET NO. 301489.1003-113 | |
| APPLICANTS Stephen F. Fulghum, Marblehead, MA; | | | | | |
| ** CONTINUING DATA ***** This application is a CON of 09/362,806 07/28/1999 PAT 6,364,829 which is a CIP of 09/238,664 01/26/1999 PAT 6,537,211 | | | | | |
| ** FOREIGN APPLICATIONS ***** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 04/15/2002 | | | | | |
| Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged _____ Examiner's Signature Initials | | STATE OR COUNTRY MA | SHEETS DRAWING 12 | TOTAL CLAIMS 20 | INDEPENDENT CLAIMS 3 |
| ADDRESS 00207 | | | | | |
| TITLE Autofluorescence imaging system for endoscopy | | | | | |
| FILING FEE RECEIVED 1140 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit | | |